PECEN/ED

MAK 3 U Z009

IOWA GENERAL ASSEMBLY FUNCTION REPORT (new)

HOUSE OF REPRESENTATIVES

This form must be filed within five business days following the date of the reception. This applies only to receptions held during the regular session where every member of the General Assembly is invited and the gift law exception applies. The form must be filed with the Secretary of the Senate or the Chief Clerk of the House, Statehouse, Des Moines, Iowa 50319. Source: Iowa Code section 68B.22(4)(r).

Lobbyist Name WILL BOG-ELS

Address 1311 50 TH ST

WEST DES MOINES, IA 50366

Telephone (517) 669 - 1648	
Client Name Towa-NE BROSKA EQU	LIPMENT DEALERS ASSOCIATION
Date and location of function 2-3-09	STATE CAPITOL RUILLE
Please provide the total amount expended, including in-kind expenditures, on food, beverage, and entertainment for the reception.	
TOTAL COST of function (includes in-kind expenditures	
Food	300 . ==
Beverage	50 . 00
Entertainment	
Other	
	Name INIU ROBERS
	Name De Contract of the Test
	Name WILL ROBERS Title DERECTOR OF CONSENDANT AFFORMS Signature COO BOY
	Date: 3-25 - 09